REIMBURSABLE WORK AUTHORIZATION 1. [							1. D	DATE OF REQUEST 2. RWA NUMBER <i>(GSA Us</i>					GSA Use only)			
3. NAME OF AGENCY							4. WORK SITE									
5A	. AGENCY CONTAC	T NAME														
5B. CONTACT'S AREA CODE			PHONE NUMBER EXT.				5E. CONTACT ADDRESS									
50	TELEPHONE NO.	AREA C	ODE	PHONE NUMBER												
5C. CONTACT'S AREA CODE PH FAX NUMBER				THONE IN	PHONE NUMBER											
5D	). E-MAIL															
6.	DESCRIPTION OF R	REQUESTED	WORK:													
CHECK AS APPROPRIATE 10. REQUESTED WC						WORK	DATES	ATES 13A. FED CODE 13B. BUR			IRFA	EAU CODE				
П	7. Plans Attached			A. START			271120	7	10/11/20 0002							
一	8. Modification			B. COMPL	ETION	l		14A. AC	14A. AGENCY FINANCE BILLING ADDRESS							
9A	. BILLING TYPE 9	B. BILLING T	ERMS	11. AGEN	CY CE	RT. AMT										
12A. AGENCY LOCATION CODE   12B. AG				ENCY ID # 12C. FUND CODE				14B. STREET ADDRESS								
								14B. CI	TY		14C. ST	ATE	14D. 2	ZIP CODE		
					CTERS)		16A. CREDIT CARD NUMBER		IMBER	16B. EXP. DATE						
								16C. TY	/DE OE	CAPD	16D, CA	DD L	JOI DEI	R'S NAME		
									.e., VISA				E OR P			
15	A. CERTIFYING OFF	FICIAL'S SIGI	NATURE		1	15B. DA	ΤΕ					•		,		
									7 055	TIEVING (		LICD	LIONE	NUMBER		
15C. NAME OF SIGNER (Type or Print)									17. CERTIFYING OFFICIAL'S PHONE NUMBER AREA CODE   PHONE NUMBER   EXT.							
	0. 1 0. 0. 0. 0. 1		,					7	,052					2711		
				GSA will	bill in ac	cordance	with FPMR	Part 101-21.	604(e)							
								ATION USE			T . = = -					
18.	. PROJECT NO.	19A. ORGAN	IIZATION	CODE 1	19B. B/	A CODE	1	9C. BOA	CODI	E	19D. C	CORF	RES. SY	MBOL		
20.	. BRIEF PROJECT D	DESCRIPTIO	N (LIMITE	ED TO 25 C	HARA	CTERS)										
		21. Action (C	heck One	e)				2:	2. PLE	ASE CHEC	K IF API	PROI	PRIATE			
	NEW CH	ANGE	DELETE		СОМРІ	LETE		COST BR		NWC	MUL			G. FUNCTION		
00		DOEO NOT A	DDL V			NITEE E	OFO NO	ATTAC	1	25 AGRI	FD LIP		See Rev	erse) TION DATE		
23.		•			JUARA	_		<u>)T</u> APPLY								
26A. ORGANIZATION 26B. BUILDING CODE NUMBER						LEASE IUMBER		26D.	F/C	26E. O/C		26F. TOTAL				
27A. GSA APPROVING OFFICIAL'S SIGNATURE 27B. [								26G. GRAND TOTAL  TE 27C. TELEPHONE NUMBER					רם.			
211	A. GSA APPROVING	5 OFFICIAL'S	SIGNAT	UKE			27B. D	41E	ARI	27C. EA CODE		IUMB		EXT.		
27	D. SIGNER'S NAME	(Type or Print)					28. POI	NT OF SA	LE TE	RMINAL (	For Credit	Card	Purchas	es Only)		
	5.5.12.10 11/ WIL	(. )   0   1   1111()						FINANCE				B. P				
29	A. CERTIFICATE OF	F COMPLETI	ON SIGN	IATURE					NER'S NAME (Type or Print)				29C. COMPLETION			
													D	ATE		

GENERAL SERVICES ADMINISTRATION

GSA FORM 2957 (REV.

## KEEP A COPY FOR YOUR RECORDS AND FORWARD ONE COPY TO YOUR OBLIGATING/PAYING OFFICE

## Instructions For RWA Form

- Enter Date of work request.
- 2. <u>Leave RWA Block Blank GSA Use Only</u>
- 3. Enter name of Agency requesting the work.
- 4. Enter location where work is to be performed.
- 5a-e. Enter information regarding the individual responsible for the project. They must have authority to make decisions regarding the project.
- 6. Enter a concise statement of work to be done, including location where work is to be performed.
- Check if Agency plans are attached.
- 8. Check if submittal is a modification to an existing RWA.
- 9a. Enter billing type: I = Interfund, C = Credit Card, P = Pre-paid
- 9b. Enter billing terms: A = Advance, C = At completion, M = Monthly, Q = Quarterly, T = At Termination, Y = Annually (in arrears), non recurring RWA's under \$25,000 will be billed at project completion.
- 10a-b. Enter agreed upon project start and completion dates.
- 11. Enter the total dollar amount approved for funding. Must match GSA's cost quote.
- 12a. Enter the eight (8) character agency location code. (Treasury Pay-station Designator)
- 12b. Enter the appropriate agency identification number.
- 12c. Enter the appropriate agency fund code.
- 12d. Enter agency accounting information (Limited to 60 characters).
- 13a. Enter the agency Fed Code. 13b. Enter the agency bureau code.
- 14a-d. Enter the appropriate billing address information.
- 15a-c. Enter signature, name and date of agency's authorized representative, certifying the validity of order and the availability of funds.
- 16a. Enter Credit Card Number (Or phone the appropriate GSA official with this information. 16b. Enter expiration date
- 16c. Enter type of Card. 16d. Enter Card Holder's name.
- 17. Enter the certifying official's phone number.

## **GSA Portion**

- 18. Enter project number, if applicable.
- 19. a. Enter GSA Organization Code. b. enter B/A Code. c. enter BOAC Code. d. enter the Organization Correspondence Symbol.
- 20. Enter a brief project description, limited to 25 characters.
- 21. Check the appropriate action block.
- 22. Check box(es) if appropriate.
- 23. Check if the project is **NOT** fixed price.
- Check if the guarantee <u>DOES NOT</u> apply.
- 25. Enter the mutually agreed upon completion date.
- 26a-f. Enter the Organization Code, Building Number, Lease Number, Function Code, hours, Object Class and Total Dollar Amount.
- 27a-d. Enter the signature, name, date, and telephone number of the GSA Approving Official.
- 28. Enter the Point of Sale Terminal (For Credit Card Purchases Only).
- 29a-c. Enter the certificate of completion signature, name and date.

## ATTACHMENT - FOR MULTIPLE BUILDINGS/MULTIPLE FUNCTION

Organization Code	Building Code	Lease Number	F/C	O/C	Total
<u> </u>					